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PTO/SB/22 (12-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			OKC00705 RECEIVE	
pplication Number 10/822,286		Filed April 12, 200	4 CENTRAL FAX CEN	
or Ergonomic Handle With Thumb Support	And A Tool Prov	ided Therewith	1440-200	
rt Unit 3676		Examiner Mark A.	Williams JAN 0 3 700	
his is a request under the provisions of 37 CFR 1.13 pplication.				
ne requested extension and fee are as follows (che		ed and enter the appropri	ate fee below):	
X One month (37 CFR 1.17(a)(1))	<u>Fee</u> \$ 120	Small Entity Fee \$ 60	\$60.00	
Two months (37 CFR 1.17(a)(2))	\$ 450	\$ 225	\$	
☐ Three months (37 CFR 1.17(a)(3))	\$ 1,020	\$ 510	\$·	
Four months (37 CFR 1.17(a)(4))	\$ 1,590	\$ 795	\$	
Five months (37 CFR 1.17(a)(5))	\$ 2,160	\$ 1,080	\$	
Applicant claims small entity status. See 37	CFR 1.27.		1	
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is at	tached.			
The Director has already been authorized to co		plication to a Deposit Acc	count.	
The Director is hereby authorized to charge an	y fees which may b	e required, or credit any c	overpayment,	
to Deposit Account Number	I have end	osed a duplicate copy of	this sheet.	
WARNING: Information on this form may become Provide credit card information and authorization	e public. Credit card n on PTO-2038.	info rmation should not be	included on this form.	
am the applicant/inventor.				
assignee of record of the entire Statement under 37 CFR 3.	interest. See 37 CF 73(b) is enclosed. (R 3.71. Form PTO/SB/96).		
attorney or agent of record. Reg	gistration Number _4	6369	1	
attomey or agent under 37 CFR Registration number if acting u	1.34.		1	
Registration number if acting to	10er 37 CPK 1.34			
Janel - Doc	recep	January 3, 20 Date	07	
Signature			406-232-0621	
Daniel P. Dooley Typed or printed name		Telephone Number		
NOTE: Signatures of all the inventors or assignces of record of than one signature is required, see below.	the entire interest or their r	epresentative(s) are required. So	ubmit multiple forms if more	
X Total of forms are submi	ited.			

complete, including garrening, preparing, and administration office comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office comments of the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office Comments of the amount of time you require to Commerce, P.O. Box 1450, Alexandrio, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.